

04-30-09

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79975 7590 01/28/2009

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Deneene Mariscal	(Depositor's name)
Deneene Mariscal	(Signature)
4-28-09	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/594,130 06/27/2007 Seiichi Toki 04/30/2009 5046180 10594130

TITLE OF INVENTION: METHOD OF TRANSFORMING MONOCOTYLEDONOUS SEED

01 FC:1501 1510.00 DA  
 02 FC:1504 300.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1510 \$300 \$0 \$1810 04/28/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
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WORLEY, CATHY KINGDON 1638 800-294000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.36(b)).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Susan J. Myers Fitch  
 2 Peter J. Dehlinger  
 3 King & Spalding LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

National Institute of Agricological Sciences Ibaraki, JAPAN

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4616 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name

Date

28 April 2009

Registration No.

55,477

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<i>Deneene Mariscal</i>	(Depositor's name)
<i>Deneene Mariscal</i>	(Signature)
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APPLICATION NO	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
10/594,130	06/27/2007	Seiichi Toki	59150-8038	7080

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nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/28/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
WORLEY, CATHY KINGDON	1638	800-294000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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**(B) RESIDENCE: (CITY and STATE OR COUNTRY)**

*Ibaraki, JAPAN*

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Authorized Signature

*Susan J. Myers*

Typed or printed name

*Susan J. Myers Fitch*

Date

*28 April 2009*

Registration No.

*55,477*

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